# PASSPORT To Health

#### Provider Newsletter

January-March 2002

Keeping Providers In-

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Keeping Providers Informed 1-800-480-6823

# **Approaches to Suicidal Clients**

Because of the extraordinarily high rates of suicide in Montana you will, undoubtedly, be confronted with clients that display one or more of the suicide warning signs that were included in the last issue of PASSPORT to Health. The following are some general approaches that may assist you in helping that person.

First, and foremost, talk to the client about it. The myth that talking about suicide might "put ideas into someone's head" that would lead to suicide has no basis in scientific evidence. In fact, the opposite is true. Be direct. Use the words suicide and killing yourself. Ask if they have a plan, ask if they have made preparations to execute that plan and ask if they have a timetable. The more detailed the plan, e.g. "I intend to shoot myself", the greater the risk. The more preparation, e.g. "I bought a pistol", the greater the risk. The more imminent the anticipated date, e.g. "I am going to wait until after the kids go back home after the holidays", the greater the risk.

Take all suicide attempts seriously, even though they may not involve particularly lethal methods or means. Persons that have attempted suicide have a lifetime risk that is estimated to be forty times greater than the general population.

Depression is also linked to suicide, although it is not an absolute indicator. Many people who kill themselves show no signs of clinical depression. Conversely, many people who are depressed have no thoughts of selfdestruction.

Most medical clinicians have limited background, training, experience, and skills in dealing with suicidal clients. It is important that you know your mental health referral resources. A crisis point is not the time to be querying your mental health colleagues about their background and training in suicide intervention. Develop an intervention plan before you need it!

If the client is in the middle of an acute crisis and the threat is imminent, stay with the client. Don't assume that if you make an appointment with a mental health provider that the client will follow-up with that appointment. Coordinate with the provider to ensure that they actually get there.



Another approach that has proven effective is to encourage the person (or his family) to either secure or remove all lethal means, i.e. firearms, prescription meds, poisons, from the house. This approach is particularly

effective for at-risk adolescents.

Most importantly, be alert for signs and be direct in your questioning. Your forthright approach could save a life.

More resources on suicide can be found on the following website: http://montanasuicide.org.

Written by Nels D. Sanddal, the President and CEO of the Critical Illness and Trauma Foundation and an Investigator at the Suicide Prevention Resource Center in Las Vegas NV.

#### **Focused Clinical Studies**

The Centers for Medicare and Medicaid Services (CMS, formerly HCFA) requires that the Department of Public Health & Human Services conduct focused clinical studies of our PASSPORT To Health clients. The goals of these studies include monitoring to assure that by mandating clients into a managed care program we are not decreasing their access to, or quality of, healthcare. We also hope that in conducting these studies we will find ways to improve the healthcare of our clients.

We have determined the focus of three studies that will be conducted over the next year. The studies are:

• C-section Rate: This study is a follow-up to an earlier study and will look at the rate of individual providers, counties, and regions of the state. We realize that in many cases a high provider rate is due to many factors (e.g., the

only provider in the county that will deliver high risk pregnancies). Because of this we will look at the county and the region to see if the rate within those boundaries is a lower rate. This study will also look at the race of the mother to determine if there is a significantly different rate between races. Our hope is that we will be able to identify any regions or areas where there is a higher rate of c-section and then if necessary, focus efforts in those areas. In the previous study Montana's rate (19.4%) was consistent with the national average, however, the Healthy People 2010 goal is 15.5%.

 Pediatric Asthma: This study is also a follow-up to a previous study. The purpose of this study is to identify pediatric inpatient hospital admissions and ER visits with a primary diagnosis of asthma. Chart reviews will then be conducted to determine if the NIH "Guidelines for the Diagnosis and Management of Asthma" have been followed. Based on results of the previous study we will initiate a Targeted Case Management Program, "Montana's RAP", (Montana's Relief from Asthma Project) early next year.

• Childhood Immunization:
This study will continue our ongoing studies that look at the rate of Montana Medicaid two year olds who are "fully immunized." We will select a random sample of clients and asking PCPs to assist us in filling out the information on the client's immunization status.

We are excited about these studies and the information that we will gain from them. We look forward to working with

### **Positive Comments**

Congratulations to the providers below who received raves from their Medicaid PASSPORT clients and Montana Health Choices!

- U **Drs. Paul and Diane Eodice** of Helena Physicians Clinic received a compliment from the mother of one of their PASSPORT clients. The mother states, "They were so wonderful, they took the time to explain things to me and made arrangements for me to stay overnight at the hospital with my one year old daughter who was afraid. I was fortunate to have seen both of them on the visit."
- Ú "I just think **Dr. Terry Smith** of Superior is the most wonderful doctor there is!"
- Ú "Karen Skonord, FNP, of Family Health Care is one of the sweetest and best healthcare providers in Kalispell."
- Ú Montana Health Choices would like to thank **Dr. Donald Sawdey** of Anaconda for increasing his client caseload and accepting new Medicaid clients.
- Ú MHC would like to recognize **Dr. Jill Robison's** office in Anaconda for correctly explaining the PASSPORT enrollment process to clients.

Positive
comments
from your
PASSPORT
clients & MHC!

### **Montana Dental Summit Update**

Over 100 participants gathered for the *Montana Dental Summit II: Building Community Partners* meeting on November 2, 2001, at the Department of Public Health & Human Services auditorium. Six satellite sites across Montana were also linked in for the daylong meeting focused on improving access to dental care through community partnerships.



The summit discussed the state's shortage of dental professionals and reviewed community services and needs to help participants gain insight into how to approach improving dental access for the short and long terms.

Congressional representative staff members highlighted activities to improve access at the federal level along with regional efforts from the Health Resources and Services Administration (HRSA) and the Centers for Medicare and Medicaid Services (CMS).

Three workgroups of the Montana Dental Access Coalition have prioritized strategies to improve access by working in correlation with health advocates, providers, and members of this committee in preparation for the 2003 legislative session. Future efforts to assist communities include hosting an Oral Health Coalition training workshop and the development of an oral health information web site.

# In the Spotlight: Dr. Sean Nesbo

Dr. Sean Nesbo is our featured PERC member this quarter. He has been a valued member of Montana's Peer Educational review Committee (PERC) since 2000.

The PERC committee is a six member panel of PASSPORT providers who help develop and decide policy and clinical issues for Medicaid's PASSPORT To Health Program.

Dr. Sean Nesbo was born in Conrad, MT in 1964 and was raised on a farm north of Shelby. Dr. Nesbo graduated from Shelby High School and attended Eastern Montana College, receiving a Bachelor of Science in Biology with a minor in chemistry in 1990. After graduation he attended the University of South Dakota and received a Bachelor of Science in Medicine in 1992 and a Medical Doctorate in 1994. He was trained in General Practice in Sioux City, IA followed by a year at Marion Health Systems in Hayward, IA. Dr. Nesbo next worked in Scobey, MT for a year and a half before returning to a training program



Dr. Nesbo returned to Montana to practice medicine at Marias Healthcare in Shelby, MT. He, his wife, and two daughters live on the family farm.

Thank you Dr. Nesbo for bringing your medical skills back home to Montana and for your work and commitment to Medicaid's PASSPORT To Health Program.

Meet Dr. Sean Nesbo, one of Montana's own!

## **PASSPORT Updates and Reminders**

Upcoming PASSPORT Provider Survey

We will soon be mailing a Medicaid PASSPORT Provider Survey to your office. Each PASSPORT contract will receive a survey. These surveys are very important to gauge the success of the PASSPORT Program and to identify where improvements need to be made. We appreciate your cooperation in filling out the survey and returning it to our office. Thanks in advance for your help!

- Please verify PASSPORT Provider information, before you provide services to the client.
- Please notify Montana Health Choices in advance if there are changes to the providers that work at your office.

## **2001 PASSPORT To Health Client Survey**

In an effort to measure the success of our program Montana Medicaid regularly sends out surveys to a random selection of PASSPORT To Health clients. This year 674 surveys were returned.

When clients were asked to rate their provider, we are very happy to report that **most clients gave you very high ratings!** Forty-four percent of adult and 48% of child respondents rated their provider as the "best personal provider possible." Only 9% to 15% gave a rating of 5 or less.

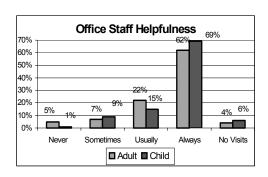
Montana Health Choices performs many outreach efforts to educate clients about the PASSPORT program and to allow clients to choose their PASSPORT provider. We asked clients if they chose their provider or if one was chosen for them. As the chart below indicates, a significant majority chose their provider.

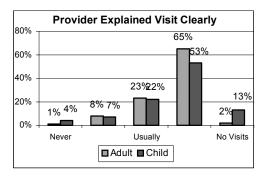
Did you Choose?

92%
80%
60%
40%
20%
0%
Yes
Adult © Child

As you know, one of the highest costs of medical care is in the emergency room. While the majority of clients never used the emergency room in the last 6 months, 30% of adults and 27% of children did use the emergency room at least once in the last 6 months. One hundred seventy two clients used the emergency room one to three times in the last six months.

Good communication with the medical provider may be one of the biggest factors in a patient's compliance, or lack of compliance, to healthcare recommendations. As the charts below indicate, the **clients feel that you are** 





helpful and clearly explain their treatment.

Finally, we asked the clients how satisfied they are with the PASSPORT Program. We were pleased to see that between 36% to 40% say they are "completely satisfied" with the PASSPORT Program! In addition, another 32% to 44% gave the program high marks. Only 3% to 5% gave the program very low marks.

It should be no surprise that your patients think **you are doing a fantastic job** – and so do we! We appreciate your commitment and dedication to serving the Medicaid population of Montana. If you would like more detailed information regarding the survey, please call the Provider Help Line and we will be happy to share any additional information you might be interested in.

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## Wishing you a Happy New Year!!



Montana Health Choices is operated by MAXIMUS under the direction of the Montana Department of Public Health and Human Services